U.S. SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC USE ONLY Prefix

DATE RECEIVED

1107 281

Serial



03038950 UNIFORM LIMITED OFFERING EXEMPTION

Cunata Nativarile Ina Nata Durahasa					
Cyneta Networks, Inc. Note Purchase Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 ☒ Rule 506 □ Section	on MG II III OE				
Type of Filing: \(\overline{\text{New Filing}}\) \(\overline{\text{D}}\) Amendment	011 4(0) 🗖 0 DOE				
A. BASIC IDENTIFICATION DAT	A CONFINED WAS				
Enter the information requested about the issuer					
Name of Issuer (check if this is an amendment and name has changed, and indicate changed)	ge.) NOV % 5 2003				
CYNETA NETWORKS, INC.					
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)					
100131 170 70 1011 100 7011 1 70 ##001	(469) 385-2434				
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
(if different from Executive Offices)					
N/A	N/A				
Brief Description of Business					
Develops and deploys core wireless network elements					
Type of Business Organization					
☑ corporation ☐ limited partnership, already formed	other (please specify):				
□ business trust □ limited partnership, to be formed					
Month Year Actual or Estimated Date of Incorporation or Organization: 01 00 🗵 Actual Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrev CN for Canada; FN for other foreign juri	viation for State: DE THOMSON				
GENERAL INSTRUCTIONS					
Federal:					
Who Must File: All issuers making an offering of securities in reliance on an exemption unseq. or 15 U.S.C. 77d(6).	nder Regulation D or Section 4(6), 17 CFR 230.501 et				
When to File: A notice must be filed no later than 15 days after the first sale of securities in Securities and Exchange Commission (SEC) on the earlier of the date it is received by the S address after the date on which it is due, on the date it was mailed by United States registered	SEC at the address given below or, if received at that				
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washing	gton, D.C. 20549.				
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which m signed must be photocopies of the manually signed copy or bear typed or printed signatures					
Information Required: A new filing must contain all information requested. Amendments any changes thereto, the information requested in Part C, and any material changes from the Part E and the Appendix need not be filed with the SEC.					
Filing Fee: There is no federal filing fee.					
State:					
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (I adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separatate where sales are to be, or have been made. If a state requires the payment of a fee as a part the proper amount shall accompany this form. This notice shall be filed in the appropriate sthe notice constitutes a part of this notice and must be completed. ATTENTION	rate notice with the Securities Administrator in each precondition to the claim for the exemption, a fee in				

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A	BAS	SIC	IDE	NTIF	ICA1	MOIT	DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:

 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☒ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Vortex Corporate Development Fund, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Vortex Management Partners, LLP, 2626 Cole Avenue, Dallas, Texas 75204
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Crescendo IV, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code)
Crescendo Ventures IV, LLC, 800 LaSalle Avenue, Suite 2250, Minneapolis, Minnesota 55402
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Partech U.S. Partners IV, LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
50 California Street, Suite 3200, San Francisco, California 94111
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Alton, Brian
Business or Residence Address (Number and Street, City, State, Zip Code)
1201 North Bowser Road, Suite 100, Richardson, Texas 75081
Check Box(es) that Apply: \square Promoter \square Beneficial Owner \square Executive Officer \boxtimes Director \square General and/or Managing Partner
Full Name (Last name first, if individual)
Liu, Victor
Business or Residence Address (Number and Street, City, State, Zip Code)
1201 North Bowser Road, Suite 100, Richardson, Texas 75081
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Hinck, Jeffrey
Business or Residence Address (Number and Street, City, State, Zip Code)
1201 North Bowser Road, Suite 100, Richardson, Texas 75081
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Krishnamurthy, Shridhar
Business or Residence Address (Number and Street, City, State, Zip Code)
1201 North Bowser Road, Suite 100, Richardson, Texas 75081

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- 3. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Dickerson, Doug
Business or Residence Address (Number and Street, City, State, Zip Code)
1201 North Bowser Road, Suite 100, Richardson, Texas 75081
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Hedfors, Bo
Business or Residence Address (Number and Street, City, State, Zip Code)
1201 North Bowser Road, Suite 100, Richardson, Texas 75081
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)
Welsh, David
Business or Residence Address (Number and Street, City, State, Zip Code)
1201 North Bowser Road, Suite 100, Richardson, Texas 75081
Check Box(es) that Apply: 🗆 Promoter 🗀 Beneficial Owner 🗵 Executive Officer 🗅 Director 🗀 General and/or Managing Partner
Full Name (Last name first, if individual)
Dilley, John
Dilley, John Business or Residence Address (Number and Street, City, State, Zip Code)
Business or Residence Address (Number and Street, City, State, Zip Code)
Business or Residence Address (Number and Street, City, State, Zip Code) 1201 North Bowser Road, Suite 100, Richardson, Texas 75081
Business or Residence Address (Number and Street, City, State, Zip Code) 1201 North Bowser Road, Suite 100, Richardson, Texas 75081 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
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Business or Residence Address (Number and Street, City, State, Zip Code) 1201 North Bowser Road, Suite 100, Richardson, Texas 75081 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Derrick, Chuck
Business or Residence Address (Number and Street, City, State, Zip Code) 1201 North Bowser Road, Suite 100, Richardson, Texas 75081 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Derrick, Chuck Business or Residence Address (Number and Street, City, State, Zip Code)
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SEC 1972 (5/91) 3 of 10

					B. INFORM	MATION	ABOUT C	FFERIN	īG				
												Yes	No
1. Has	the issuer	sold, or do	es the issu	er intend to	sell, to nor	n-accredite	ed investors	in this of	fering?	•••••			\boxtimes
				Answe	r also in Ap _l	pendix, C	olumn 2, if	filing und	ler ULOE.				
2. Wha								N/A					
3. Doe	s the offer	ing permit	joint own	ership of a	single unit?.				***************	• • • • • • • • • • • • • • • • • • • •			\boxtimes
			•	-	-							sion or similar	
remunera	ition for so	licitation o	of purchase	ers in conn	ection with s	sales of se	curities in t	he offerin	ig. If a perso	on to be li	sted is an a	ssociated perso	on or
	agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	Full Name (Last name first, if individual)												
N/A	`												
Business	or Reside	nce Addres	ss (Numbe	r and Stree	t, City, State	, Zip Cod	e)		·-·-		.		
N/A													
Name of	Associated	d Broker o	r Dealer										
N/A													
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N/A						<u> </u>					· · · · · · · · · · · · · · · · · · ·		
	or Reside	nce Addres	ss (Numbe	r and Stree	t, City, State	e, Zip Cod	le)			Sapr.			
N/A.			<u> </u>	- 1				M. Carlo					r
Name of	Associated	d Broker o	r Dealer								Established		
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States in				ited Purch individual						· ·		🗖 All	States
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Full Name (Last name first, if individual)													
N/A													
	or Reside	nce Addre	ss (Numbe	r and Stree	t, City, State	e, Zip Coo	le)						
N/A													
	Associate	d Broker o	r Dealer							<i>:</i> _			
N/A						<u> </u>			- 1				
	(Check "	'All States'	or check	ited Purch individual	States)			************			•••••	🗆 All	States
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggre	gate Offering Price	Am	ount Already Sold
	Debt	\$	0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	1,000,000	\$	500,000
	Partnership Interests	\$	0	\$	0
	Other (Specify:)	\$	0	\$	0
	Total			\$	500,000
	Answer also in Appendix Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
			Number nvestors		ollar Amount f Purchases
	Accredited Investors		9	\$	500,000
	Non-accredited Investors		N/A	\$	<u>N/A</u>
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of Offering		Type of Security	Do	ollar Amount Sold
	Rule 505		N/A	\$	<u>N/A</u>
	Regulation A		N/A	\$	<u>N/A</u>
	Rule 504		N/A	\$	N/A
	Total		N/A	\$	<u>N/A</u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		×	\$	0
	Printing and Engraving Costs		×	\$	50
	Legal Fees		×	\$	5,000
	Accounting Fees (Audit)		X	\$	0
	Engineering Fees		×	\$	0
	Sales Commissions (specify finders' fees separately)		×	\$	0
	Other Expenses (registration fee, listing fee and miscellaneous).		×	\$	0
	Total		X	\$	5,050

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	S AND USE O	F PROCEE	DS		
b. Enter the difference between the aggregate offering price given in response to Part C - Question I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$_	994,950	_
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to used for each of the purposes shown. If the amount for any purpose is not known, furnish estimate and check the box to the left of the estimate. The total of the payments listed muse equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4. above.	an st				
	O Dir	rments to fficers, ectors, & ffiliates	•	Payments to Others	
Salaries and fees		0		\$	<u>)</u>
Purchase of real estate	× \$_	0		\$0	<u>!</u>
Purchase, rental or leasing and installation of machinery and equipment	× \$_	0		\$)
Construction or leasing of plant buildings and facilities	× \$_	0		\$	<u>!</u>
Acquisition of other businesses (including the value of securities involved in this offering may be used in exchange for the assets or securities of another issuer pursuant to a merger)	that) 🗷 💲	0		\$)
Repayment of indebtedness	🗷 \$_	0		\$!
Working capital	🗷 \$_	0		\$994,950	Ĺ
Other (specify):	🗷 🗷	0		\$!
	× -	0			-
Column Totals	🗷 ^{\$} _	0		\$!
	× 2-	0	×	\$(
	\$_	0		\$ 994,950	!
Total Payments Listed (column totals added)		⊠ \$		<u>994,950</u>	

<u> 1 - January Brasilian (j. 1888)</u>	D. FEDERAL SIGNATURE				
signature constitutes an undertaking by		rson. If this notice is filed under Rule 505, the following change Commission, upon written request of its staff, the (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature / /	Date			
Cyneta Networks, Inc. November 24, 2003					
Name of Signer (Print or Type) Title of Signer (Print or Type)					
Brian Alton	Chief Financial Officer, Treasurer and Secretary				
	ATTENTION				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

SEC 1972 (5/91) 7 of 10

2